

IOWA BOARD OF EDUCATIONAL EXAMINERS

IN THE MATTER OF:

)
) **Case No. 16-37**
)

Jason M. Ellingson,

) **License No. 337433**
)

Respondent.

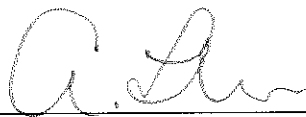
) **FINAL ORDER**
)

1. The Respondent holds a Master Educator License (FOLDER # 337433) with the following endorsements: K-12 English as a Second Language and 5-12 English/Language Arts. Respondent's license expired on June 30, 2016. Respondent also holds an expired Class A License with the following endorsements: PK-12 Principal/PK-12 Special Education Supervisor; Evaluator (New); PK-12 Superintendent & AEA Administrator.
2. Pursuant to Board rule, a practitioner may voluntarily surrender the practitioner's license if the practitioner waives the right to hearing before the Board and notifies the Board of the intent to accept a permanent revocation of the practitioner's license. Upon receipt of a voluntary surrender, "[t]he Board may issue an order permanently revoking the practitioner license . . ." 282 I.A.C. 11.4(6).
3. On July 19, 2016, the Respondent filed a Surrender of Practitioner License and Waiver of Formal Hearing form. The voluntary surrender was presented to and accepted by the Board at a meeting held on August 5, 2016.

ORDER

THEREFORE, the Board acknowledges the Respondent's voluntary surrender of his practitioner license and incorporates his action into this Order by attaching a copy of the surrender to this Order. In accordance with this filing, all licenses issued by the Board to the Respondent and his privilege to practice in Iowa are **PERMANENTLY REVOKED** with no possibility of reinstatement.

Dated this 5th day of August, 2016.



Dr. Ann Lebo, Executive Director
On behalf of the Board

Copies to:

Jason M. Ellingson (restricted-certified mail and first-class mail)
RESPONDENT

Jordan Esbrook (electronic mail)
Assistant Attorney General
ATTORNEY FOR STATE

STATE of IOWA
BOARD OF EDUCATIONAL EXAMINERS
Grimes State Office Building
Des Moines, IA 50319-0147

RECEIVED
EXECUTIVE DIRECTOR
BOARD OF EDUCATIONAL EXAMINERS

JUL 19 2016

**SURRENDER OF PRACTITIONER LICENSE
AND
WAIVER OF FORMAL HEARING
Before the
IOWA BOARD OF EDUCATIONAL EXAMINERS**

I, JASON ELLINGSON, (BoEE Folder No. 16-37), swear and affirm under oath:

that I am the Respondent in a case currently before the Iowa Board of Educational Examiners;

that I currently hold a valid or expired Iowa practitioner's license;

that I have been informed of and understand the nature of the proceedings before the Board and have received a copy of the complaint filed against me and the applicable rules (282 Iowa Administrative Code, Chapters 11, 25, and 26); and

that I am aware of the Board's legal authority to exonerate, warn, or reprimand me as a licensed individual, following a Board investigation into allegations of conduct violative of Board criteria, and of the Board's authority to suspend or revoke my license for conduct violative of Board criteria; and

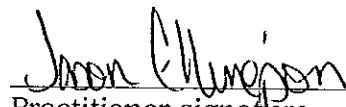
that on April 8, 2016, the Board found probable cause to charge me with: committing a sexual or indecent act with a minor; failing to make reasonable effort to protect student health and safety; and willful and repeated failure to conform to the minimum standards of acceptable and prevailing educational practice in Iowa; and

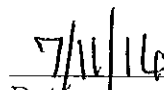
that I understand that I have an opportunity to be heard and to contest the allegations against me in formal hearing before the Board; and that by waiving the formal hearing, I waive my right to challenge the allegations against me in the complaint, and as a consequence, my privilege to teach, administer, or coach in Iowa will be permanently revoked with no possibility of reinstatement;

that I understand that if the Board accepts my license surrender, an Order permanently revoking my license and authorization will be issued and, as a consequence, my privilege to teach, administer, or coach in Iowa will be permanently revoked with no possibility of reinstatement; and

that I understand that the Board will notify the NASDTEC (National Association of State Directors of Teacher Education & Certification) National Clearinghouse that my license has been revoked and that other state teacher licensing boards will have access to this information.

HAVING ACKNOWLEDGED MY RIGHTS AS OUTLINED ABOVE, I hereby formally waive my right to a hearing before the Board and request that my license to teach, administer, or coach in Iowa be revoked. I affirm that my decision is made voluntarily and knowingly.


Practitioner signature


Date